INVENTOR INFORMATION

Inv ntor On Given Name::

Bret A.

Family Name::

Ferree

Postal Address Line One::

1238 Cliff Laine Drive

City::

Cincinnati

State or Province::

Ohio

Country::

U.S.

Postal or Zip Code::

45208

City of Residence::

Cincinnati

State or Prov. of Residence:: **Country of Residence::**

Ohio U.S.

Citizenship Country::

U.S.

CORRESPONDENCE INFORMATION

Name Line One::

John G. Posa

Name Line Two::

Gifford, Krass, Groh, Sprinkle, Anderson & Citkowski, P.C.

Name Line Three:: Address Line One::

280 N. Old Woodward Ave.

Address Line Two::

Suite 400

City::

Birmingham

State or Province::

MΙ

Postal or Zip Code::

48009-5394

Telephone::

(734) 913-9300

Fax::

(734) 913-6007

Electronic Mail::

APPLICATION INFORMATION

Title Line One::

METHODS OF PREVENTING

Title Line Two::

ADHESIONS FOLLOWING

Title Line Three:: Title Line Four::

LAMINECTOMIES AND OTHER SURGICAL PROCEDURES

Total Drawing Sheets::

0

Application Type::

Utility

Docket Number::

BAF-19202/29

REPRESENTATIVE INFORMATION

Representative Customer Number::

025006